Attorney Docket No.

BIRCH, STEWART, KOLASCH & BIRCH, LLP

. PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

nsert Title:									
ill in Appropriate			nereto. If not attached heret	o, the application is identified by th	e attorney docket	number as set			
nformation -	forth above and/or th	e ronowing: was filed on				as			
or Use Without	The specification was filed on								
Specification	and amended on	(if applicable) and/or							
Attached:	the specification		_ as PCT						
insert Priority Information: (f appropriate)	International Ap	; and was							
	amended on (if applicable)								
	amended by any amendment referred to above. I acknowledge the duty to disclose information whi Regulations, §1.56. I do not know and do not believe the same was ever know thereof, or patented or described in any printed publication year prior to this application, that the same was not in purpore to this application, that the invention has not been purpore of this application in any country foreign to the Universe translative or assigns more than twelve months (six may patent or inventor's certificate on this invention has been from application by me or my legal representatives or assigns, examples or inventor's certificate listed below and have also identified a filing date before that of the application on which priority Prior Foreign Application(s) 2004-001842 Japan (Country)		to above. lose information which is the same was ever known my printed publication in e same was not in public u ention has not been patent entry foreign to the United welve months (six months invention has been filed i intatives or assigns, except enefits under Title 35, Uni nd have also identified belo ion on which priority is cla	, United States Code, §119(a)-(d) of any foreign application(s) for disclaimed: Priority Claim January 7, 2004 (Month/Day/Year Filed) Yes No		our invention nore than one than one year led before the or my legal pplication for a prior to this n(s) for patent tificate having			
	(Number)	(Country)		(Month/Day/Year Filed)	ies	NO			
	(Number)	(Country)	1	(Month/Day/Year Filed)	Yes	No			
	(Number)	(Country)		(Month/Day/Year Filed)	Yes	No			
	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed								
Insert Provisional Application(s): (if any)	(Application Number)		(Filing Date)						
	(Application Number) (Filing Date)								
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:								
	Country		Application Number	Date of Filing (Mo	nth/Day/Year)				
Insert Requested Information: (if appropriate)									
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.								
Insert Prior U.S. Application(s): (if any)	(Application Numbe	r)	(Filing Date)	(Status - patented,	Status - patented, pending, abandoned)				
Page 1 of 2 (Rev. 07/2003)	(Application Numbe	r)	(Filing Date)	(Status - patented,	pending, abandor	ned)			

Attorney Docket No.

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

BIRCH, STEWART, KOLASCH & BIRCH, LLP or CUSTOMER NO. 02292

P.O. Box 747 • Falls Church, Virginia 22040-0747

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PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

n.v								
II Name of First or Sole Inventor: sert Name of Inventor sert Date This Document is Signed	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
sert Date This Document is Signed	Yuji ANDO	Yuji Ando		June 1,2006				
sert Residence	Residence (City, State & Country)	V	CITIZENSHIP					
sert Citizenship →	Yamatokoriyama-Shi, Nara, Japan		Japanese					
sert Post Office Address →	MAILING ADDRESS (Complete Street Address including City, State & Country)							
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Il Name of Third Inventor, if any:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*					
see above	Shinya UEDA	Shinya UEDA		June 1,2006				
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il Name of Fourth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
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	MAILING ADDRESS (Complete Street Address including City, State & Country)							
ll Name of Fifth	CHENNA G (FARGINANA) G	INTERNITORIC CICALATURE		DATE				
Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
	Residence (City, State & Country)	CITIZENSHIP						
	MAILING ADDRESS (Complete Street Address including City, State & Country)							
II Name of Sixth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
	Residence (City, State & Country)		CITIZENSHIP					
	MAILING ADDRESS (Complete Street Address in	ncluding City, State & Country)						

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